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	plt.figure(figsize=(12,8)) sns.distplot(hf_data[hf_data['DEATH_EVENT'] == 1]['serum_sodium'],color = '#31688e', kde=True, norm_hi st = False,label = 'Patient Died') sns.distplot(hf_data[hf_data['DEATH_EVENT'] == 0]['serum_sodium'],color = '#440154',kde=True, norm_his t = False,label = 'Patient Lived') plt.legend(fontsize = "x-large") <pre> </pre> <pre> </pre> <pre></pre>
	0.150 0.125 0.100 0.075 0.050 0.025 0.000 110 120 130 140 150 serum_sodium
In [309]:	<pre>patient_died = hf_data[hf_data['DEATH_EVENT'] == 1]['serum_sodium'] patient_lived = hf_data[hf_data['DEATH_EVENT'] == 0]['serum_sodium'] print("patient died: ",round(patient_died.mean(),2)) print("patient lived: ",round(patient_lived.mean(),2)) # comparing samples stat, p = mannwhitneyu(patient_died, patient_lived) print('Statistics=%.3f, p=%.3f' % (stat, p)) # interpreting alpha = 0.05 if p > alpha: print('Same distribution (fail to reject H0)') else:</pre>
	print('Different distribution (reject H0)') patient died: 135.38 patient lived: 137.22 Statistics=7226.500, p=0.000 Different distribution (reject H0) The levels of serum creatinine was lower on average among the patients who died. 2.2.2 Categorical Variables Chi-square goodness of fit test is a non-parametric test used for comparing the observed distribution of data with the expected distribution of the data to decided whether there is any statistically significant difference between the observed distribution and a theoretical distribution.
In [313]:	H0:There is no difference between observed and expected frequencies HA:There is difference between observed and expected frequencies Anaemia tab = pd.crosstab(index = hf_data['anaemia'], columns = hf_data['DEATH_EVENT']) print(tab) from scipy.stats import chi2_contingency stat, pvalue, dof, expected = chi2_contingency(tab, correction = True) print("chi-sq-statistic: ", round(stat, 4) , " p-value: ", round(pvalue, 4), " deg of freedom: ", dof) if pvalue < 0.05:
	print ('Reject Null Hypothesis') else: print ('Retain Null Hypothesis') DEATH_EVENT
In [315]:	<pre>tab = pd.crosstab(index = hf_data['diabetes'], columns = hf_data['DEATH_EVENT']) print(tab) from scipy.stats import chi2_contingency stat, pvalue, dof, expected = chi2_contingency(tab, correction = True) print("chi-sq-statistic: ", round(stat, 4) , " p-value:", round(pvalue, 4), " deg of freedom:", dof) if pvalue < 0.05: print ('Reject Null Hypothesis') else: print ('Retain Null Hypothesis')</pre>
In [317]:	<pre>diabetes 0</pre>
	<pre>print("chi-sq-statistic: ", round(stat, 4) , " p-value:", round(pvalue, 4), " deg of freedom:", dof) if pvalue < 0.05: print ('Reject Null Hypothesis') else: print ('Retain Null Hypothesis') DEATH_EVENT</pre>
In [319]:	The relationship between high blood pressure and patient death is isignificant. Sex tab = pd.crosstab(index = hf_data['sex'], columns = hf_data['DEATH_EVENT']) print(tab) from scipy.stats import chi2_contingency stat, pvalue, dof, expected = chi2_contingency(tab, correction = True) print("chi-sq-statistic: ", round(stat, 4) , " p-value:", round(pvalue, 4), " deg of freedom:", dof) if pvalue < 0.05: print ('Reject Null Hypothesis') else:
In [321]:	<pre>print ('Retain Null Hypothesis') DEATH_EVENT 0 1 sex 0 71 34 1 132 62 chi-sq-statistic: 0.003 p-value: 0.9561 deg of freedom: 1 Retain Null Hypothesis The relationship between sex and patient death is isignificant. Smoking tab = pd.crosstab(index = hf_data['smoking'], columns = hf_data['DEATH_EVENT']) print(tab)</pre>
	<pre>from scipy.stats import chi2_contingency stat, pvalue, dof, expected = chi2_contingency(tab, correction = True) print("chi-sq-statistic: ", round(stat, 4) , " p-value:", round(pvalue, 4), " deg of freedom:", dof) if pvalue < 0.05: print ('Reject Null Hypothesis') else: print ('Retain Null Hypothesis') DEATH_EVENT</pre>
In [335]•	The relationship between smoking and patient death is isignificant. 3.Modeling & Evaluation The aim of our model would be to predict the event of patient's death. Since the outcome is categorical in nature, classification algorthims have been applied. Seperating Dependent and Independent variables # followup period would automatically be less for patients who have died so it is redundant
111 [333].	# Deth Event is the Dependent Variable features = hf_data.drop(['DEATH_EVENT', 'time'], axis=1) X_features = list(features.columns) Y = hf_data.DEATH_EVENT 3.1 Logistic Regression Logistic Regression using statsmodel package has been used. The statsmodel package includes well tabulated summary for the model. Advantages: 1. Easy interpretation 2. Probabilities of outcome can be estimated
In [336]:	3. Robust from overfitting 4. No assumptions pertaining to the distribution # Adding a constant for Logistic model to work while using statmodels package import statsmodels.api as sm X = sm.add_constant(hf_data[X_features]) X.info() <class 'pandas.core.frame.dataframe'=""> RangeIndex: 299 entries, 0 to 298 Data columns (total 12 columns): const</class>
In [434]:	ejection_fraction
<pre>In [435]: In [436]: Out[436]:</pre>	logit_model.summary2()
	Date: 2020-10-11 03:43 BIC: 283.6336 No. Observations: 239 Log-Likelihood: -108.96 Df Model: 11 LL-Null: -145.40 Df Residuals: 227 LLR p-value: 3.4498e-11 Converged: 1.0000 Scale: 1.0000 No. Iterations: 7.0000 Coef. Std.Err. z P> z [0.025 0.975] const 2.8202 5.3507 0.5271 0.5981 -7.6669 13.3073 age 0.0681 0.0156 4.3569 0.0000 0.0375 0.0987 anaemia 0.3699 0.3517 1.0517 0.2930 -0.3195 1.0593
In [437]:	creatinine_phosphokinase 0.0002 0.0002 1.3940 0.1633 -0.0001 0.0006 diabetes 0.2971 0.3548 0.8372 0.4025 -0.3984 0.9925 ejection_fraction -0.0784 0.0182 -4.3058 0.0000 -0.1141 -0.0427 high_blood_pressure 0.4646 0.3602 1.2901 0.1970 -0.2413 1.1705 platelets -0.0000 0.0000 -0.8947 0.3710 -0.0000 0.0000 serum_creatinine 0.7502 0.1955 3.8366 0.0001 0.3670 1.1335 serum_sodium -0.0440 0.0383 -1.1485 0.2508 -0.1192 0.0311 sex -0.6644 0.4042 -1.6438 0.1002 -1.4566 0.1278 smoking 0.1689 0.4128 0.4091 0.6824 -0.6402 0.9780 ## Model Dignostics def get significant vars (lm):
<pre>In [438]: Out[438]: In [439]:</pre>	<pre>var_p_vals_df = pd.DataFrame(lm.pvalues) var_p_vals_df['vars'] = var_p_vals_df.index var_p_vals_df.columns = ['pvals', 'vars'] return list(var_p_vals_df[var_p_vals_df.pvals <= 0.05]['vars']) # Significant Variables significant_vars = get_significant_vars(logit_model) significant_vars ['age', 'ejection_fraction', 'serum_creatinine']</pre>
In [440]: Out[440]:	<pre># Printing Model Summary final_logit.summary2()</pre>
In [441]:	No. Iterations: 6.0000 Coef. Std.Err. z P> z [0.025 0.975] Const -3.1110 1.0023 -3.1037 0.0019 -5.0755 -1.1464 age 0.0614 0.0144 4.2504 0.0000 0.0331 0.0896 ejection_fraction -0.0734 0.0171 -4.3002 0.0000 -0.1069 -0.0399 serum_creatinine 0.7433 0.1756 4.2331 0.0000 0.3991 1.0874 # Predicting probabilities on Test Data y_pred_df = pd.DataFrame(
Out[441]: In [442]:	<pre>y_pred_df.predicted_prob.head(8) 281 0.563221 265 0.125246 164 0.149984 9 0.998004 77 0.070533 278 0.151192 93 0.499640 109 0.124214 Name: predicted_prob, dtype: float64</pre> from sklearn import metrics # RoC Curve
	<pre># RoC Curve can be used to understand the overall performance of a logistic regression model and used for model selection # RoC Curve is a plot between False positive rate [FP / (TN + FP)] and True positive rate [TP / (TP+F N)] # Higher the AUC, better the model # AUC < 0.5 model is inferior to a case of having no model # AUC > 0.7 model is useful def draw_roc(actual, probs): fpr, \ tpr, \ thresholds = metrics.roc_curve(actual, probs, drop_intermediate = False) auc_score = metrics.roc_auc_score(actual, probs) plt.figure(figsize=(8, 6)) plt.plot(fpr, tpr, label='ROC curve (area = %0.2f)' % auc_score) plt.xlim([0.0, 1.0])</pre>
	<pre>plt.ylim([0.0, 1.05]) plt.xlabel('False Positive Rate or [1 - True Negative Rate]') plt.ylabel('True Positive Rate') plt.legend(loc="lower right") plt.show() return fpr, tpr, thresholds fpr, tpr, thresholds = draw_roc(y_pred_df.actual, y_pred_df.predicted_prob) auc_score = metrics.roc_auc_score(y_pred_df.actual, y_pred_df.predicted_prob) print("auc_score:", round(float(auc_score), 2))</pre> 1.0
	0.8 0.6 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0
In [443]:	<pre>False Positive Rate or [1 - True Negative Rate] auc_score: 0.71 # Identifying the right probability plt.figure(figsize = (8,6)) sns.kdeplot(y_pred_df[y_pred_df.actual == 1]["predicted_prob"], color = '#31688e', shade=True, label =</pre>
	2.5 2.0 1.5 1.0 0.5
In [444]:	-0.25 0.00 0.25 0.50 0.75 1.00 1.25 1.50 y_pred_df['predicted'] = y_pred_df.predicted_prob.map(lambda x: 1 if x > 0.25 else 0) print("Y Predicted") print(y_pred_df.predicted.value_counts()) print("") print("Y Actual") print(y_pred_df.actual.value_counts()) print("") print("confusion matrix") from cf_matrix import make_confusion_matrix cm = metrics.confusion_matrix(y_pred_df.actual, y_pred_df.predicted, [0,1]) print(cm)
	<pre>labels = ["TN", "FP", "FN", "TP"] categories = ["Patient Lived [0]", "Patient Died [1]"] make_confusion_matrix(cm,</pre>
	Name: actual, dtype: int64 confusion matrix [[24 11] [10 15]] TN 24 40.00% FP 11 18.33% -22.5 -20.0 -17.5
	FN 10 15 25.00% -12.5 Patient Lived [0] Patient Died [1] Predicted label Accuracy=0.650 Precision=0.577 Recall=0.600
In [450]:	<pre>F1 Score=0.588 y_pred_df['predicted'] = y_pred_df.predicted_prob.map(lambda x: 1 if x > 0.23 else 0) print("Y Predicted") print(y pred_df.predicted.value_counts()) print("") print("Y Actual") print(y_pred_df.actual.value_counts()) print("") print("") print("confusion matrix") from cf_matrix import make_confusion_matrix cm = metrics.confusion_matrix(y_pred_df.actual, y_pred_df.predicted, [0,1]) print(cm)</pre>
	<pre>labels = ["TN", "FP", "FN", "TP"] categories = ["Patient Lived [0]", "Patient Died [1]"] make_confusion_matrix(cm,</pre>
	Confusion matrix [[24 11] [8 17]] TN FP 11 40.00% 18.33% -18 -15
	FN 8 17 28.33%
In [451]:	
In [5241	3.2 Naive-Bayes Classifier Naive Bayes methods are a set of supervised learning algorithms based on applying Bayes' theorem with the "naive" assumption of conditional independence between every pair of features given the value of the class variable. Advantages: 1. Works well when non-linearity is present 2. Requires less computational power Continous independent variables should hold normal distribution # normalizing continous variables
In [525]: In [526]:	<pre>from sklearn.preprocessing import StandardScaler cols_to_norm = ['age', 'creatinine_phosphokinase', 'ejection_fraction', 'platelets', 'serum_creatinin e','serum_sodium'] X_train[cols_to_norm] = StandardScaler().fit_transform(X_train[cols_to_norm]) from sklearn.naive_bayes import GaussianNB gnb = GaussianNB().fit(X_train, y_train) # Identifying optimal probability X_test[cols_to_norm] = StandardScaler().fit_transform(X_test[cols_to_norm]) gnb_predict = gnb.predict_proba(X_test) gnb_predict = pd.DataFrame(gnb_predict)[1] gnb_predict = gnb_predict.to_numpy() # Gathering probabilities</pre>
Out[527]:	<pre>y_pred_df = pd.DataFrame({ "actual": y_test,</pre>
In [530]:	219 0 0.049599 184 1 0.074531 25 1 0.248535
	0.8 Positive Rate (area = 0.73)
Out[530]: In [511]:	False Positive Rate or [1 - True Negative Rate] 0.73 # Identifying the right probability plt.figure(figsize = (8,6)) sns.kdeplot(y_pred_df[y_pred_df.actual == 1]["predicted_prob"], color = '#31688e', shade=True, label = 'Patient Died') sns.kdeplot(y_pred_df[y_pred_df.actual == 0]["predicted_prob"], color = '#440154', shade=True, label = 'Patient Lived') plt.legend() plt.show() Patient Died
	Patient Lived Patient Lived 1
In [522]:	<pre>v_pred_df['gnb_predict'] = y_pred_df.predicted_prob.map(lambda x: 1 if x > 0.18 else 0) print("Y Predicted") print(y_pred_df.gnb_predict.value_counts()) print("") print("Y Actual") print(y_pred_df.actual.value_counts()) print("") print(y_pred_df.actual.value_counts()) print("") print("confusion matrix") cm = metrics.confusion_matrix(y_pred_df.actual, y_pred_df.gnb_predict, [0,1]) print(cm) cf matrix = metrics.confusion matrix(y pred_df.actual, y_pred_df.gnb_predict)</pre>
	<pre>cf_matrix = metrics.confusion_matrix(y_pred_df.actual, y_pred_df.gnb_predict) labels = ["TN","FP","FN","TP"] categories = ["Patient Lived [0]","Patient Died [1]"] make_confusion_matrix(cf_matrix,</pre>
	FN 11 14 23.33% Patient Lived [0] Patient Died [1] Predicted label Accuracy=0.717 Precision=0.700 Recall=0.560
	F1 Score=0.622

	### Patient Level 19 Patient Dead (1)	Y Actual 0 35 1 25 Name: actual confusion marginal	<pre>categories=categories,</pre>	
Political Love (0) Patient Doe (1) Predicted by September 1972 Political Love (1) Predicted by September 1972 Political Love (1) Predicted by September 1972 Political Color (### Patient Lovel (0)	[[30 5] [12 13]]	TN FP 5	- 25 - 20
Particular for Comment	Procedure Stock Procedure Procedur		12 13 21.67% 21.67% atient Lived [0] Patient Died [1] Predicted label	- 10
3. 3. 5. 3. 5. 6 3. 5. 7 5. 6 3. 5 5. 7 5. 6 5. 7 5. 6 5. 7 5. 6 5. 7 5. 6 5. 7 5. 6 5. 7 5. 6 5. 7	1	<pre>from sklear print(metri report = cl report_df =</pre>	Recall=0.520 F1 Score=0.605 Performance n.metrics import classification_report cs.classification_report(y_pred_df.actu assification_report(y_pred_df.actual, y pd.DataFrame(report).transpose() o_csv("nb_report.csv")	_pred_df.gnb_predict, output_dict= True)
### Standard See 10001 ### Control Part Part Part ### Control Part Part Part Part ### Control Part Part Part Part Part ### Control Part Part Part Part Part Part ### Control Part Part Part Part Part Part Part ### Control Part Part Part Part Part Part Part Part Part ### Control Part Part Part Part Part Part Part Part	# Total Control of the control of th	accuracy macro ave weighted ave	0.70 0.56 0.62 0.72 0.72 0.70 0.72 0.70 0.72 0.71 0.72 0.71 est Neighbors classifier	25 60 60 60
products and control advanced by proposition activation, y good attitude product, [0,1,1] and activation activ	prior the state of the surface and prior of prior of the surface and the	<pre># Training knnmodel = # Predictin knn_predict y_pred_df[' print("Y Pr print(y_pre print("") print("Y Ac</pre>	<pre>the model KNeighborsClassifier(n_neighbors=3).fit g the output = knnmodel.predict(X_test) knn_predict'] = knn_predict edicted") d_df.knn_predict.value_counts()) tual")</pre>	
18	Same is that predicte, dayors birth? Same is that predicte, dayors birth? A possible of the predicted process of the process of the predicted pr	<pre>print("") print("conf cm = metric print(cm) cf_matrix = labels = [" categories</pre>	<pre>usion matrix") s.confusion_matrix(y_pred_df.actual, y metrics.confusion_matrix(y_pred_df.act TN","FP","FN","TP"] = ["Patient Lived [0]","Patient Died [1 ion_matrix(cf_matrix,</pre>	cual, y_pred_df.knn_predict)
The part of the pa	TN FP 7 7 7 7 7 7 7 7 7	0 49 1 11 Name: knn_p Y Actual 0 35 1 25 Name: actual confusion ma [[28 7]	redict, dtype: int64	
Patient Lived [0] Patient Died [1] Accuracy=0.533 Precision=0.364 Recall=0.160 F1 Score=0.222 print (metrics. classification_report (y_pred_df['actual'], y_pred_df['knn_predict'] }) proof sign recall f1-score support 0 0.57 0.80 0.67 35 0.06 0.22 25 accuracy macric avg 0.48 0.53 0.48 00 3.4 Results 3.4 Results Logistic Regression: AUC - 0.71; Accuracy 0.88; Sansilivity 0.88; Specificity 0.89; Precision 0.81 N-Bayes: AUC - 0.73; Accuracy 0.72; Sensitivity 0.56; Specificity 0.89; Precision 0.72 KNN: AUC - NA; Accuracy 0.53; Sensitivity 0.16; Specificity 0.80; Precision 0.72 KNN: AUC - NA; Accuracy 0.53; Sensitivity 0.16; Specificity 0.80; Precision 0.36** References 1. Chicco, D., Jurman, G., Machine learning can predict survival of patients with heart failure from serum creatinine and ejection frailone, BMC Med Inform Decis Mak 20, 16 (2020). https://doi.org/10.1186/s12911-020-1023-5 2. Ahmod T, Munir A, Bhatti SH, Affab M, Raza MA, Survival analysis of heart failure patients: a case study, PLoS ONE, 2017; 12(7):0181001. 3. Johns Hopkins Rheumatology, Creatine Phosphokinase (CPK), https://www.hopkinslugus.org/lugus-testoidinical-testo/creatine-phosphokinases-out/. Accessed 25 Jan 2019. 4. Ejection Fraction Heart Failure Measurement American Heart https://www.hopkinslugus.org/lugus-testoidinical-testo/creatine-phosphokinases-out/. Accessed 25 Jan 2019. 5. Platelets and Cardiovascular Disease - AHA Journals https://www.wabajournals.org/doi/hu/li/10.1101/CIR.000008897.16588. 6. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jan.ass/journals.org/condens/17/10/2886 7. Case-Lo C. What is a sodium blood test?tatios.//www.healthline.com/health/sodium-blood. 8. Mann-Whitney test (independent samples) - MedCalic.* https://www.medalic.org/manual/mannwhitney.php. 9. Chi-Square Goodness of Fit Tost - Statistics Solutions.https://www.statisticssolutions.com/chi-square-goodness-of-fit-test/	Patient Lived [0] Patient Died [1] Predicted label Accuracy=0.533 Precision=0.364 Recall=0.160 F1 Score=0.222 psint (metalox.class/fication_recent (y_pred_df['actual'], y_pred_df['ann_predict']))) precision receil f1-score support 0 9.57 0.88 0.67 35 accuracy		TN FP 7 46.67% 11.67%	- 24 - 20
Precision 0.364 Recall=0.160 F1 Score=0.222 : print(metrics.classification_report(y_pred_df('actual*i], y_pred_df('knn_predict']))	Precision report (y_pred_df('actual'), y_pred_df('knn_predict'))) precision report (y_pred_df('actual'), y_pred_df('knn_predict'))) precision recall f1-score support 0 0.57 0.88 0.67 3.5 1 0.36 0.16 0.22 2.5 accuracy 0.47 0.48 0.44 60 weighted avg 0.48 0.59 0.49 60 3.4 Results Logistic Regression: AUC - 0.71; Accuracy 0.68; Sensitivity 0.68; Specificity 0.69; Precision 0.61 N-Bayes: AUC - 0.73; Accuracy 0.72; Sensitivity 0.56; Specificity 0.83; Precision 0.72 KNN: AUC - NA; Accuracy 0.73; Sensitivity 0.16; Specificity 0.83; Precision 0.36** References 1. Chicco, D., Jurman, G. Machine learning can predict survival of patients with heart failure from serum creatinine and ejection fraione. BMC Med Inform Decis Mak 20, 16 (2020). https://doi.org/10.1186/s12911-020-1023-5 2. Ahmad T, Munit A, Bhatti SH, Aftab M, Raza MA. Survival analysis of heart failure patients: a case study. PLoS ONE. 2017; 12(7):0181001. 3. Johns Hopkins Rheumatology. Creatine Phosphokinase (CPK). https://www.hopkinslupus.org/lupus-tests/clinical-leats/creatine phosphokinase-cpk/. Accessed 25 Jan 2019. 4. Ejection Fraction Heart Failure Measurement American Heart.https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement 5. Platelets and Cardiovascular Disease - AHA Journals.https://www.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. 6. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasa.aasplournals.org/content/17/10/2886 7. Case-Lo C. What is a sodium blood test?https://www.healthline.com/health/sodium-blood. 8. Mann-Whitney test (independent samples) - MedCalc.* https://www.medcalc.org/manual/mannwhitney.php.		21 4 6.67% atient Lived [0] Patient Died [1] Predicted label	-8
macro avg 0.47 0.48 0.53 0.48 60 3.4 Results Logistic Regression: AUC - 0.71; Accuracy 0.68; Sensitivity 0.68; Specificity 0.69; Precision 0.61 N-Bayes: AUC - 0.73; Accuracy 0.72; Sensitivity 0.56; Specificity 0.83; Precision 0.72 KNN: AUC - NA; Accuracy 0.53; Sensitivity 0.16; Specificity 0.80; Precision 0.36** References 1. Chicco, D., Jurman, G., Machine learning can predict survival of patients with heart failure from serum creatinine and ejection fralone. BMC Med Inform Decis Mak 20, 16 (2020). https://doi.org/10.1186/s12911-020-1023-5 2. Ahmad T, Munir A, Bhatti SH, Aftab M, Raza MA. Survival analysis of heart failure patients: a case study. PLoS ONE. 2017; 12(7):0181001. 3. Johns Hopkins Rheumatology. Creatine Phosphokinase (CPK). https://www.hopkinslupus.org/lupus-tests/clinical-tests/creatine.phosphokinase-cpk/. Accessed 25 Jan 2019. 4. Ejection Fraction Heart Failure Measurement American Heart.https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement 5. Platelets and Cardiovascular Disease - AHA Journals.https://www.haajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. 6. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasn.asnjournals.org/content/17/10/2886 7. Case-Lo C. What is a sodium blood test?https://www.healthline.com/health/sodium-blood. 8. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php. 9. Chi-Square Goodness of Fit Test - Statistics Solutions.https://www.statisticssolutions.com/chi-square-goodness-of-fit-test/	macro avg 0.47 0.48 0.53 0.44 60 3.4 Results Logistic Regression: AUC - 0.71; Accuracy 0.68; Sensitivity 0.68; Specificity 0.69; Precision 0.61 N-Bayes: AUC - 0.73; Accuracy 0.72; Sensitivity 0.56; Specificity 0.83; Precision 0.72 KNN: AUC - NA; Accuracy 0.53; Sensitivity 0.16; Specificity 0.80; Precision 0.36** References 1. Chicco, D., Jurman, G. Machine learning can predict survival of patients with heart failure from serum creatinine and ejection frailone. BMC Med Inform Decis Mak 20, 16 (2020). https://doi.org/10.1186/s12911-020-1023-5 2. Ahmad T, Munir A, Bhatti SH, Aftab M, Raza MA. Survival analysis of heart failure patients: a case study. PLoS ONE. 2017; 12(7):0181001. 3. Johns Hopkins Rheumatology. Creatine Phosphokinase (CPK). https://www.hopkinslupus.org/lupus-tests/clinical-tests/creatinephosphokinase-cpk/. Accessed 25 Jan 2019. 4. Ejection Fraction Heart Failure Measurement American Heart.https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement 5. Platelets and Cardiovascular Disease - AHA Journals.https://www.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. 6. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasn.asnjournals.org/content/17/10/2886 7. Case-Lo C. What is a sodium blood test?https://www.healthiine.com/health/sodium-blood.		Precision=0.364 Recall=0.160 F1 Score=0.222 ics.classification_report(y_pred_df['a precision recall f1-score support) 0.57 0.80 0.67	ort 35
 References Chicco, D., Jurman, G. Machine learning can predict survival of patients with heart failure from serum creatinine and ejection fr alone. BMC Med Inform Decis Mak 20, 16 (2020). https://doi.org/10.1186/s12911-020-1023-5 Ahmad T, Munir A, Bhatti SH, Aftab M, Raza MA. Survival analysis of heart failure patients: a case study. PLoS ONE. 2017; 12(7):0181001. Johns Hopkins Rheumatology. Creatine Phosphokinase (CPK). https://www.hopkinslupus.org/lupus-tests/clinical-tests/creatine phosphokinase-cpk/. Accessed 25 Jan 2019. Ejection Fraction Heart Failure Measurement American Heart.https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement Platelets and Cardiovascular Disease - AHA Journals.https://www.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasn.asnjournals.org/content/17/10/2886 Case-Lo C. What is a sodium blood test?https://www.healthline.com/health/sodium-blood. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php. Chi-Square Goodness of Fit Test - Statistics Solutions.https://www.statisticssolutions.com/chi-square-goodness-of-fit-test/ 	 Chicco, D., Jurman, G. Machine learning can predict survival of patients with heart failure from serum creatinine and ejection fralone. BMC Med Inform Decis Mak 20, 16 (2020). https://doi.org/10.1186/s12911-020-1023-5 Ahmad T, Munir A, Bhatti SH, Aftab M, Raza MA. Survival analysis of heart failure patients: a case study. PLoS ONE. 2017; 12(7):0181001. Johns Hopkins Rheumatology. Creatine Phosphokinase (CPK). https://www.hopkinslupus.org/lupus-tests/clinical-tests/creatine.phosphokinase-cpk/. Accessed 25 Jan 2019. Ejection Fraction Heart Failure Measurement American Heart.https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement Platelets and Cardiovascular Disease - AHA Journals.https://www.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasn.asnjournals.org/content/17/10/2886 Case-Lo C. What is a sodium blood test?https://www.healthline.com/health/sodium-blood. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php. 	macro avenue weighted avenue weighted avenue	ssion: AUC - 0.71; Accuracy 0.68; Sensitivity 0.68; - 0.73; Accuracy 0.72; Sensitivity 0.56; Specificity 0.56	; Specificity 0.69 ;Precision 0.61 0.83 ;Precision 0.72
 2. Ejection Fraction Heart Failure Measurement American Heart.https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement 3. Platelets and Cardiovascular Disease - AHA Journals.https://www.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. 4. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasn.asnjournals.org/content/17/10/2886 5. Case-Lo C. What is a sodium blood test?https://www.healthline.com/health/sodium-blood. 8. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php. 9. Chi-Square Goodness of Fit Test - Statistics Solutions.https://www.statisticssolutions.com/chi-square-goodness-of-fit-test/ 	 phosphokinase-cpk/. Accessed 25 Jan 2019. 4. Ejection Fraction Heart Failure Measurement American Heart. https://www.heart.org/en/health-topics/heart-failure/diagnosing-failure/ejection-fraction-heart-failure-measurement 5. Platelets and Cardiovascular Disease - AHA Journals. https://www.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588. 6. Increase in Creatinine and Cardiovascular Risk in Patients Retrieved October 10, 2020, from https://jasn.asnjournals.org/content/17/10/2886 7. Case-Lo C. What is a sodium blood test? https://www.healthline.com/health/sodium-blood. 8. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php. 	Referen 1. Chicco, D., alone. BM0 2. Ahmad T, I 12(7):0181	CES Jurman, G. Machine learning can predict survival of post of the control of t	patients with heart failure from serum creatinine and ejection fra g <u>/10.1186/s12911-020-1023-5</u> sis of heart failure patients: a case study. PLoS ONE. 2017;
8. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php . 9. Chi-Square Goodness of Fit Test - Statistics Solutions. https://www.statisticssolutions.com/chi-square-goodness-of-fit-test/	8. Mann-Whitney test (independent samples) - MedCalc." https://www.medcalc.org/manual/mannwhitney.php .	 phosphokii 4. Ejection Fr failure/eject 5. Platelets a 6. Increase in https://jasn 	nase-cpk/. Accessed 25 Jan 2019. action Heart Failure Measurement American Heart.html tion-fraction-heart-failure-measurement and Cardiovascular Disease - AHA Journals.https://www Creatinine and Cardiovascular Risk in Patients Recasnjournals.org/content/17/10/2886	https://www.heart.org/en/health-topics/heart-failure/diagnosing-h w.ahajournals.org/doi/full/10.1161/01.CIR.0000086897.15588.4 etrieved October 10, 2020, from
		8. Mann-Whit	ney test (independent samples) - MedCalc." <u>https://w</u>	ww.medcalc.org/manual/mannwhitney.php.